

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICEADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826

FACILITY LOCATION Leavenworth, WA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

WA-000190-2

PERMIT NUMBER

DISCHARGE NUMBER

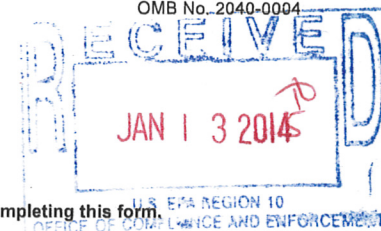
## MONITORING PERIOD


YEAR	MO	DAY	YEAR	MO	DAY
2014	12	1	2014	12	31

FROM

TO

NOTE: Read instructions before completing this form.

Form Approved,  
OMB No. 2040-0004

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	26.41	27.84	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	0	0	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.	
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab	
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				<1	<1	<1	MG/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab	
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						TELEPHONE		DATE		
David Carie Hatchery Manager, LNFH							509	548-7641	2014	12	31
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



		SUSPENDED					SETTLABLE					PONDS IN USE	GPM
DATE	DEC '14 Location	SAMPLE VOLUME	COMP SAMPLE	TSS	NET DIFF MG/L	RELEASE TSS	NET SAMPLE CONC ML/L	RELEASE SETT.	WASTE KG/D	TOTAL FLOW MG/D			
12/5/2014	WEEK 1										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml	1.9				<0.1		-58.77498	25.88256	10 X 100'S	10000	
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	7800	
	UNDER BRIDGE DISCHARGE	1000ml	1.3								NURSERY	174	
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	17974	
12/11/2014	WEEK 2										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		1.7			<0.1				10 X 100'S	11200	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	5700	
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	420	
	PA POND DISCHARGE	1000 ml		<1			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	17320	
12/18/2014	WEEK 3										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		<1			<0.1			26.9856	10 X 100'S	11200	
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	5700	
	UNDER BRIDGE DISCHARGE										NURSERY	1840	
	PA POND DISCHARGE	1000 ml		<1			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	18740	
12/23/2014	WEEK 4										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml					<0.1			27.8496	10 X 100'S	11200	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	5700	
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	2440	
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0	
12/30/2014	WEEK 5												
	INTAKE ICICLE	1000 ml					<0.1						
	PA POND DISCHARGE	1000 ml					<0.1				TOTAL GPM <sup>1</sup>	19340	
	RELEASE/DRAWDOWN												
	ADULT POND	1000 ml											
	8x80 RACEWAYS	1000ml											
	10x100 RACEWAYS	1000ml											
	COHO FL's	1000 ml											

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICE  
ADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826

FACILITY  
LOCATION Leavenworth, WA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

WA-000190-2

PERMIT NUMBER

DISCHARGE NUMBER

## MONITORING PERIOD

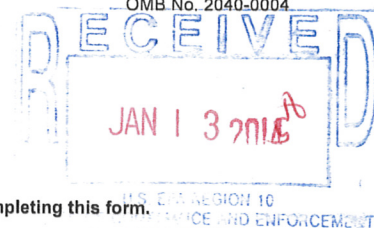
YEAR	MO	DAY	YEAR	MO	DAY
2014	11	1	2014	11	30

FROM

TO

NOTE: Read instructions before completing this form.

Form Approved.  
OMB No. 2040-0004



PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	25.86	25.86	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A			Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	53.83	97.882	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A			1/Month	Comp.
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A				2/Month	Grab
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				N/A	N/A	N/A	MG/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*				2/Month	Grab
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2				1/Week	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						TELEPHONE		DATE		
David Carie Hatchery Manager, LNFH							509	548-7641	2014	11	30
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



## SUSPENDED

## SETTLEABLE

	Nov '14	SAMPLE	COMP	TSS	NET DIFF	RELEASE	NET SAMPLE	RELEASE	WASTE	TOTAL FLOW	PONDS IN USE	GPM
DATE	Location	VOLUME	SAMPLE		MG/L	TSS	CONC ML/L	SETT.	KG/D	MG/D		
11/6/2014	WEEK 1										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml	1.4				<0.1		9.7882	25.8624	10 X 100'S	10000
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	7800
	UNDER BRIDGE DISCHARGE	1000ml	1.5								NURSERY	160
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	17960
	WEEK 2										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		ICE			ICE			25.8624	10 X 100'S	10000
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	7800
	UNDER BRIDGE DISCHARGE	1000ml					ICE				NURSERY	160
	PA POND DISCHARGE	1000 ml		ICE			ICE				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	17960
	WEEK 3										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		ICE			ICE			25.8624	10 X 100'S	10000
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	7800
	UNDER BRIDGE DISCHARGE										NURSERY	160
	PA POND DISCHARGE	1000 ml		ICE			ICE				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	17960
11/24/2014	WEEK 4										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml	<1				<0.1		97.882	25.8624	10 X 100'S	10000
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	7800
	UNDER BRIDGE DISCHARGE	1000 ml									NURSERY	160
	PA POND DISCHARGE	1000 ml	1.0				<0.1				Trout Pond / FL'S	0
	WEEK 5											
	INTAKE ICICLE	1000 ml										
	PA POND DISCHARGE	1000 ml									TOTAL GPM <sup>1</sup>	17960
	RELEASE/DRAWDOWN											
	ADULT POND	1000 ml										
	8x80 RACEWAYS	1000ml										
	10x100 RACEWAYS	1000ml										
	COHO FL's	1000 ml										

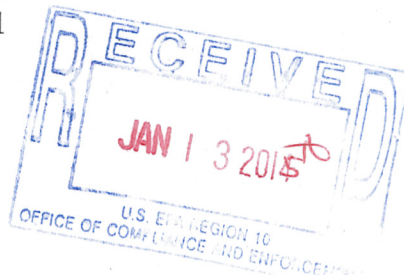
\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water





United States Department of the Interior  
Fish and Wildlife Service  
Leavenworth National Fish Hatchery Complex  
12790 Fish Hatchery Road  
Leavenworth, WA 98826  
Phone: (509) 548-7641  
Fax: (509) 548-3401



# MEMORANDUM

To: Chris Gebhardt USEPA  
From: Chris Foster  
Subject: November Water Sampling  
Date: November 30, 2014

During the month of November we experienced some unusually cold weather. This cold weather restricted safe access to collect scheduled water samples. Please note during this time our fish ponds were frozen with 3-4 inches of ice. This ice kept us from performing any feeding or cleaning, likely minimizing any increase in suspended or settleable solid discharge.

Some water samples were collected at the beginning and end of the month and are reported in the attached 3320-1.



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICE

ADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826

FACILITY  
LOCATION Leavenworth, WA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

WA-000190-2

PERMIT NUMBER

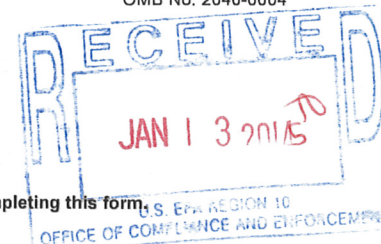
DISCHARGE NUMBER

## MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
2014	10	1	2014	10	31

NOTE: Read instructions before completing this form.

U.S. EPA REGION 10  
OFFICE OF COMPLIANCE AND ENFORCEMENT



PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Flow	SAMPLE MEASUREMENT	25.64	25.86	MGD							Total	
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A		Daily			
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	319.41	319.41	Kg/Day								
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.		
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab		
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				1	1.45	1.9	MG/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab		
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab		
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.							TELEPHONE		DATE		
David Carie Hatchery Manager, LNFH								509	548-7641	2014	10	31
TYPED OR PRINTED								AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



RECEIVED  
JAN 13 2015  
U.S. FISH & WILDLIFE SERVICE  
REGION 10  
PORTLAND, OREGON

SUSPENDED						SETTLEABLE						
	Oct `14	SAMPLE	COMP	TSS	NET DIFF	RELEASE	NET SAMPLE	RELEASE	WASTE	TOTAL FLOW	PONDS IN USE	GPM
DATE	Location	VOLUME	SAMPLE		MG/L	TSS	CONC ML/L	SETT.	KG/D	MG/D		
10/9/2014	WEEK 1										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml	1				<0.1		319.4136	25.5744	10 X 100'S	9800
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	7800
	UNDER BRIDGE DISCHARGE	1000ml	4.3								NURSERY	160
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	17760
10/16/2014	WEEK 2										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		2.6			<0.1			25.5744	10 X 100'S	9800
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	7800
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	160
	PA POND DISCHARGE	1000 ml		1			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	17760
	WEEK 3										ADULT POND	Reuse
10/23/2014	INTAKE ICICLE	1000 ml		17.7			<0.1			25.5744	10 X 100'S	9800
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	7800
	UNDER BRIDGE DISCHARGE										NURSERY	160
	PA POND DISCHARGE	1000 ml		1.9			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	17760
10/30/2014	WEEK 4										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml					<0.1			25.8624	10 X 100'S	10000
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	7800
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	160
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0
	WEEK 5											
	INTAKE ICICLE	1000 ml										
	PA POND DISCHARGE	1000 ml									TOTAL GPM <sup>1</sup>	17960
	RELEASE/DRAWDOWN											
	ADULT POND	1000 ml										
	8x80 RACEWAYS	1000ml										
	10x100 RACEWAYS	1000ml										
	COHO FL's	1000 ml										

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICE

ADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826

FACILITY  
LOCATION Leavenworth, WA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

WA-000190-2

PERMIT NUMBER

DISCHARGE NUMBER

OCT 14 2014

Form Approved.  
OMB No. 2040-0004

## MONITORING PERIOD

YEAR	MO	DAY		YEAR	MO	DAY
2014	9	1	TO	2014	9	30

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Flow	SAMPLE MEASUREMENT	24.95	25.57	MGD							Total	
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily		
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	92.432	92.432	Kg/Day								
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.		
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab		
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				2.4	4.45	6.5	MG/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab		
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab		
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.							TELEPHONE		DATE		
David Carie Hatchery Manager, LNFH								509	548-7641	2014	9	30
TYPED OR PRINTED								AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



		SUSPENDED					SETTLEABLE						
	Sept `14	SAMPLE	COMP	TSS	NET DIFF	RELEASE	NET SAMPLE	RELEASE	WASTE	TOTAL FLOW	PONDS IN USE	GPM	
DATE	Location	VOLUME	SAMPLE		MG/L	TSS	CONC ML/L	SETT.	KG/D	MG/D			
	WEEK 1										ADULT POND	Reuse	
9/4/2014	INTAKE ICICLE	1000 ml	1.2				<0.1		92.432	24.4224	10 X 100'S	8400	
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	8400	
	UNDER BRIDGE DISCHARGE	1000ml	2.2								NURSERY	160	
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	16960	
9/11/2014	WEEK 2										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		<1			<0.1			24.4224	10 X 100'S	8400	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	8400	
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	160	
	PA POND DISCHARGE	1000 ml		2.4			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	16960	
9/17/2014	WEEK 3										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		<1			<0.1			25.5744	10 X 100'S	9800	
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	7800	
	UNDER BRIDGE DISCHARGE										NURSERY	160	
	PA POND DISCHARGE	1000 ml		6.5			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	17760	
9/26/2014	WEEK 4										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml					<0.1			25.5744	10 X 100'S	9800	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	7800	
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	160	
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0	
9/30/2014	WEEK 5												
	INTAKE ICICLE	1000 ml					<0.1						
	PA POND DISCHARGE	1000 ml					<0.1				TOTAL GPM <sup>1</sup>	17760	
	RELEASE/DRAWDOWN												
	ADULT POND	1000 ml											
	8x80 RACEWAYS	1000ml											
	10x100 RACEWAYS	1000ml											
	COHO FL's	1000 ml											

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICE

ADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826

FACILITY  
LOCATION Leavenworth, WA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved.  
OMB No. 2040-0004

WA-000190-2

PERMIT NUMBER

DISCHARGE NUMBER

## MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
2014	8	1	2014	8	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	24.36	24.46	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	-36.95	-36.95	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.	
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A		N/A	0.1	N/A			2/Month	Grab
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				8	9.75	11.5	MG/L			
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	15*			2/Month	Grab
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	0.2			1/Week	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.				TELEPHONE		DATE				
David Carie Hatchery Manager, LNFH					509	548-7641	2014	8	31		
TYPED OR PRINTED					AREA CODE	NUMBER	YEAR	MO	DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



		SUSPENDED					SETTLEABLE						
	Aug `14	SAMPLE	COMP	TSS	NET DIFF	RELEASE	NET SAMPLE	RELEASE	WASTE	TOTAL FLOW	PONDS IN USE	GPM	
DATE	Location	VOLUME	SAMPLE		MG/L	TSS	CONC ML/L	SETT.	KG/D	MG/D			
	WEEK 1										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S	Reuse	
8/6/2014	INTAKE ICICLE	1000 ml	1.4				<0.1		-36.951	24.408		8400	
	OUTSIDE SC CANAL DISCHARGE	1000 ml										8400	
	UNDER BRIDGE DISCHARGE	1000ml	1									0	
	PA POND DISCHARGE	1000ml					<0.1					150	
											TOTAL GPM <sup>1</sup>	16950	
8/14/2014	WEEK 2										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S	Reuse	
	INTAKE ICICLE	1000 ml		7.2			<0.1			24.4656		8400	
	OUTSIDE SC CANAL DISCHARGE	1000ml										8400	
	UNDER BRIDGE DISCHARGE	1000ml					<0.1					40	
	PA POND DISCHARGE	1000 ml		8			<0.1					150	
											TOTAL GPM <sup>1</sup>	16990	
8/18/2014	WEEK 3										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S	Reuse	
	INTAKE ICICLE	1000 ml		1.7			<0.1			24.2496		8400	
	OUTSIDE SC CANAL DISCHARGE											8400	
	UNDER BRIDGE DISCHARGE											40	
	PA POND DISCHARGE	1000 ml		11.5			<0.1					0	
											TOTAL GPM <sup>1</sup>	16840	
8/28/2014	WEEK 4										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S	Reuse	
	INTAKE ICICLE	1000 ml					<0.1			24.34752		8400	
	OUTSIDE SC CANAL DISCHARGE	1000ml										8400	
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1					108	
	PA POND DISCHARGE	1000 ml					<0.1					0	
	WEEK 5												
	INTAKE ICICLE	1000 ml											
	PA POND DISCHARGE	1000 ml									TOTAL GPM <sup>1</sup>	16908	
	RELEASE/DRAWDOWN												
	ADULT POND	1000 ml											
	8x80 RACEWAYS	1000ml											
	10x100 RACEWAYS	1000ml											
	COHO FL's	1000 ml											

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICEADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826FACILITY  
LOCATION Leavenworth, WANATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)Form Approved.  
OMB No. 2040-0004

WA-000190-2


PERMIT NUMBER

DISCHARGE NUMBER

## MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
2014	7	1		2014	7	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	24.408	24.408	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	18.47	18.47	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.	
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab	
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				1.5	1.55	1.6	MG/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab	
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						TELEPHONE		DATE		
David Carie Hatchery Manager, LNFH							509	548-7641	2014	7	31
TYPED OR PRINTED					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



## SUSPENDED

## SETTLEABLE

July '14		SUSPENDED			SETTLEABLE							
DATE	Location	SAMPLE VOLUME	COMP SAMPLE	TSS	NET DIFF MG/L	RELEASE TSS	NET SAMPLE CONC ML/L	RELEASE SETT.	WASTE KG/D	TOTAL FLOW MG/D	PONDS IN USE	GPM
	<b>WEEK 1</b>										ADULT POND	Reuse
7/2/2014	INTAKE ICICLE	1000 ml	1.6				<0.1		18.4755	24.408	10 X 100'S	8400
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	8400
	UNDER BRIDGE DISCHARGE	1000ml	1.8								NURSERY	0
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	150
											<b>TOTAL GPM<sup>1</sup></b>	<b>16950</b>
7/8/2014	<b>WEEK 2</b>										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		2.5			<0.1			24.408	10 X 100'S	8400
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	8400
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	0
	PA POND DISCHARGE	1000 ml		1.6			<0.1				Trout Pond / FL'S	150
											<b>TOTAL GPM<sup>1</sup></b>	<b>16950</b>
7/15/2014	<b>WEEK 3</b>										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		1.5			<0.1			24.408	10 X 100'S	8400
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	8400
	UNDER BRIDGE DISCHARGE										NURSERY	0
	PA POND DISCHARGE	1000 ml		1.5			<0.1				Trout Pond / FL'S	150
											<b>TOTAL GPM<sup>1</sup></b>	<b>16950</b>
7/24/2014	<b>WEEK 4</b>										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml					<0.1			24.408	10 X 100'S	8400
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	8400
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	0
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	150
7/31/2014	<b>WEEK 5</b>											
	INTAKE ICICLE	1000 ml					<0.1					
	PA POND DISCHARGE	1000 ml					<0.1				<b>TOTAL GPM<sup>1</sup></b>	<b>16950</b>
	<b>RELEASE/DRAWDOWN</b>											
	ADULT POND	1000 ml										
	8x80 RACEWAYS	1000ml										
	10x100 RACEWAYS	1000ml										
	COHO FL's	1000 ml										

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICE

ADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826

FACILITY  
LOCATION Leavenworth, WA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

WA-000190-2

PERMIT NUMBER

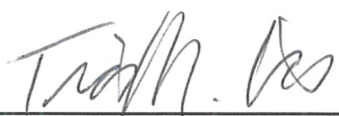
DISCHARGE NUMBER

## MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
2014	1	1		2014	1	31

APR 11 2014

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	20.84	20.84	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	0	0	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.	
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab	
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				<1	2.35	3.7	MG/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab	
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						TELEPHONE		DATE		
Travis Collier Hatchery Manager, LNFH							509	548-7641	2014	1	31
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



APR 11 2014

APR 1 2014

		SUSPENDED					SETTLEABLE						
	January `14	SAMPLE	COMP	TSS	NET DIFF	RELEASE	NET SAMPLE	RELEASE	WASTE	TOTAL FLOW	PONDS IN USE	GPM	
DATE	Location	VOLUME	SAMPLE		MG/L	TSS	CONC ML/L	SETT.	KG/D	MG/D			
1/2/2014	WEEK 1										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml	<1				<0.1		0	20.844	10 X 100'S	7150	
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	4500	
	UNDER BRIDGE DISCHARGE		<1								NURSERY	2825	
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	14475	
1/7/2014	WEEK 2										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		<1			<0.1			20.844	10 X 100'S	7150	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	4500	
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	2825	
	PA POND DISCHARGE	1000 ml		<1			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	14475	
1/16/2014	WEEK 3										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		1.3			<0.1			20.844	10 X 100'S	7150	
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	4500	
	UNDER BRIDGE DISCHARGE										NURSERY	2825	
	PA POND DISCHARGE	1000 ml		3.7			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	14475	
1/23/2014	WEEK 4										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml					<0.1			20.844	10 X 100'S	7150	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	4500	
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	2825	
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0	
1/30/2014	WEEK 5												
	INTAKE ICICLE	1000 ml					<0.1						
	PA POND DISCHARGE	1000 ml					<0.1				TOTAL GPM <sup>1</sup>	14475	
	RELEASE/DRAWDOWN												
	ADULT POND	1000 ml											
	L 8x80 RACEWAYS	1000ml											
	10x100 RACEWAYS	1000ml											
	COHO FL's	1000 ml											

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICEADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826FACILITY  
LOCATION Leavenworth, WANATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

WA-000190-2

PERMIT NUMBER

DISCHARGE NUMBER

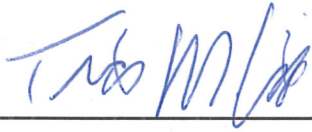
## MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
2014	2	1		2014	2	28

Form Approved.  
OMB No. 2040-0004

APR 11 2014

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	29.51	29.51	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	0	0	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.	
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab	
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				<1	1.6	2.2	MG/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab	
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						TELEPHONE		DATE		
Travis Collier Hatchery Manager, LNFH							509	548-7641	2014	2	28
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



## SUSPENDED

## SETTLEABLE

DATE	February '14	SAMPLE VOLUME	COMP SAMPLE	TSS	NET DIFF MG/L	RELEASE TSS	NET SAMPLE CONC ML/L	RELEASE SETT.	WASTE KG/D	TOTAL FLOW MG/D	PONDS IN USE	GPM
	Location											
2/6/2014	WEEK 1										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml	3				<0.1		0	29.5128	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	6750
	UNDER BRIDGE DISCHARGE		2.1								NURSERY	2825
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	20495
2/13/2014	WEEK 2										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		2			<0.1			29.5128	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	6750
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	2825
	PA POND DISCHARGE	1000 ml		2.2			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	20495
2/20/2014	WEEK 3										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		1			<0.1			29.5128	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	6750
	UNDER BRIDGE DISCHARGE										NURSERY	2825
	PA POND DISCHARGE	1000 ml		<1			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	20495
2/27/2014	WEEK 4										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml					<0.1			29.5128	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	6750
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	2825
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0
	WEEK 5											
	INTAKE ICICLE	1000 ml										
	PA POND DISCHARGE	1000 ml									TOTAL GPM <sup>1</sup>	20495
	RELEASE/DRAWDOWN											
	ADULT POND	1000 ml										
	L 8x80 RACEWAYS	1000ml										
	10x100 RACEWAYS	1000ml										
	COHO FL's	1000 ml										

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICEADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826FACILITY  
LOCATION Leavenworth, WANATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

WA-000190-2

PERMIT NUMBER

DISCHARGE NUMBER

Form Approved.  
OMB No. 2040-0004

APR 11 2014

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	2014	3	1		2014	3	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS									
Flow	SAMPLE MEASUREMENT	30.09	30.28	MGD							Total						
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A			Daily							
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	0	0	Kg/Day													
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A			1/Month	Comp.						
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L									
	PERMIT REQUIREMENT	N/A	N/A		N/A	0.1	N/A			2/Month	Grab						
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				<1	1	2	MG/L									
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	15*			2/Month	Grab						
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L									
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	0.2			1/Week	Grab						
	SAMPLE MEASUREMENT																
	PERMIT REQUIREMENT																
	SAMPLE MEASUREMENT																
	PERMIT REQUIREMENT																
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE								
Steve Croci Deputy Complex Manager, LNFH							509	548-7641	2014	3	31						
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY				

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



## SUSPENDED

## SETTLEABLE

DATE	March '14	SAMPLE	COMP	TSS	NET DIFF	RELEASE	NET SAMPLE	RELEASE	WASTE	TOTAL FLOW	PONDS IN USE	GPM
	Location	VOLUME	SAMPLE		MG/L	TSS	CONC ML/L	SETT.	KG/D	MG/D		
3/6/2014	WEEK 1										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml	6.2				<0.1		0	29.5128	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	6750
	UNDER BRIDGE DISCHARGE		4.4								NURSERY	2825
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	20495
3/13/2014	WEEK 2										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		3			<0.1			30.2832	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	6750
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	3360
	PA POND DISCHARGE	1000 ml		<1			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	21030
3/18/2014	WEEK 3										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		1.8			<0.1			30.2832	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	6750
	UNDER BRIDGE DISCHARGE										NURSERY	3360
	PA POND DISCHARGE	1000 ml		2			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	21030
3/25/2014	WEEK 4										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml					<0.1			30.2832	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	6750
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	3360
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0
	WEEK 5											
	INTAKE ICICLE	1000 ml										
	PA POND DISCHARGE	1000 ml									TOTAL GPM <sup>1</sup>	21030
	RELEASE/DRAWDOWN											
	ADULT POND	1000 ml										
	L 8x80 RACEWAYS	1000ml										
	10x100 RACEWAYS	1000ml										
	COHO FL's	1000 ml										

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



RECEIVED

APR 11 2014

U.S. EPA REGION 10  
OFFICE OF COMPLIANCE AND ENFORCEMENT

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICE

ADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826

FACILITY  
LOCATION Leavenworth, WA

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)


WA-000190-2	
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
2014	6	1	FROM	2014	6	30
			TO			

Form Approved.  
OMB No. 2040-0004

JUL 15 2014

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	23.5872	23.6304	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	527.66	527.66	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.	
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab	
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				<1	<1	<1	MG/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab	
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						TELEPHONE		DATE		
Steve Croci Deputy Complex Manager, LNFH							509	548-7641	2014	6	30
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



JUL 15 2014

		SUSPENDED					SETTLEABLE						
	June `14	SAMPLE VOLUME	COMP SAMPLE	TSS	NET DIFF MG/L	RELEASE TSS	NET SAMPLE CONC ML/L	RELEASE SETT.	WASTE KG/D	TOTAL FLOW MG/D	PONDS IN USE	GPM	
DATE	Location												
6/5/2014	WEEK 1										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S TOTAL GPM <sup>1</sup>	Reuse	
	INTAKE ICICLE	1000 ml	2.9				<0.1		527.66355	23.6304		7800	
	OUTSIDE SC CANAL DISCHARGE	1000 ml										8400	
	UNDER BRIDGE DISCHARGE	1000ml	8.8									60	
	PA POND DISCHARGE	1000ml					<0.1					150	
6/12/2014	WEEK 2										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S TOTAL GPM <sup>1</sup>	Reuse	
	INTAKE ICICLE	1000 ml		1.6			<0.1			23.6304		7800	
	OUTSIDE SC CANAL DISCHARGE	1000ml										8400	
	UNDER BRIDGE DISCHARGE	1000ml					<0.1					60	
	PA POND DISCHARGE	1000 ml		<1			<0.1					150	
6/18/2014	WEEK 3										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S TOTAL GPM <sup>1</sup>	Reuse	
	INTAKE ICICLE	1000 ml		1.5			<0.1			23.544		7800	
	OUTSIDE SC CANAL DISCHARGE											8400	
	UNDER BRIDGE DISCHARGE											0	
	PA POND DISCHARGE	1000 ml		<1			<0.1					150	
6/26/2014	WEEK 4										ADULT POND 10 X 100'S 8 X 80'S NURSERY Trout Pond / FL'S	Reuse	
	INTAKE ICICLE	1000 ml					<0.1			23.544		7800	
	OUTSIDE SC CANAL DISCHARGE	1000ml										8400	
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1					0	
	PA POND DISCHARGE	1000 ml					<0.1					150	
	WEEK 5												
	INTAKE ICICLE	1000 ml											
	PA POND DISCHARGE	1000 ml									TOTAL GPM <sup>1</sup>	16350	
	RELEASE/DRAWDOWN												
	ADULT POND	1000 ml											
	8x80 RACEWAYS	1000ml											
	10x100 RACEWAYS	1000ml											
	COHO FL's	1000 ml											

\*When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICEADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826FACILITY  
LOCATION Leavenworth, WANATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)Form Approved.  
OMB No. 2040-0004

WA-000190-2

PERMIT NUMBER


DISCHARGE NUMBER

## MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
2014	5	1		2014	5	31

NOTE: Read instructions before completing this form.

JUL 1 5 2014

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Flow	SAMPLE MEASUREMENT	14.9256	23.4144	MGD							Total
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily	
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	0	0	Kg/Day							
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.	
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab	
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				<1	3.59	6.2	MG/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab	
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L			
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Steve Croci Deputy Complex Manager, LNFH							509	548-7641	2014	5	31
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



		SUSPENDED					SETTLEABLE						
	May '14	SAMPLE VOLUME	COMP SAMPLE	TSS	NET DIFF MG/L	RELEASE TSS	NET SAMPLE CONC ML/L	RELEASE SETT.	WASTE KG/D	TOTAL FLOW MG/D	PONDS IN USE	GPM	
DATE	Location												
5/1/2014	WEEK 1										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml	2.5				<0.1		0	12.096	10 X 100'S	0	
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	8400	
	UNDER BRIDGE DISCHARGE	1000ml	2.4								NURSERY	0	
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	8400	
5/8/2014	WEEK 2										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		3			<0.1			12.096	10 X 100'S	0	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	8400	
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	0	
	PA POND DISCHARGE	1000 ml		<1			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	8400	
5/13/2014	WEEK 3										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml		2.8			<0.1			12.096	10 X 100'S	0	
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	8400	
	UNDER BRIDGE DISCHARGE										NURSERY	0	
	PA POND DISCHARGE	1000 ml		6.2			<0.1				Trout Pond / FL'S	0	
											TOTAL GPM <sup>1</sup>	8400	
5/22/2014	WEEK 4										ADULT POND	Reuse	
	INTAKE ICICLE	1000 ml					<0.1			23.4144	10 X 100'S	7800	
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	8400	
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	60	
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0	
5/29/2014	WEEK 5												
	INTAKE ICICLE	1000 ml					<0.1						
	PA POND DISCHARGE	1000 ml					<0.1				TOTAL GPM <sup>1</sup>	16260	
	RELEASE/DRAWDOWN												
	ADULT POND	1000 ml											
	8x80 RACEWAYS	1000ml											
	10x100 RACEWAYS	1000ml											
	COHO FL's	1000 ml											

<sup>1</sup>When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME U.S. DEPT. OF INTERIOR U.S. FISH  
AND WILDLIFE SERVICEADDRESS Leavenworth National Fish Hatchery  
12790 Fish Hatchery Rd  
Leavenworth, WA 98826FACILITY  
LOCATION Leavenworth, WANATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)Form Approved.  
OMB No. 2040-0004

WA-000190-2

PERMIT NUMBER

DISCHARGE NUMBER

## MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
2014	4	1	2014	4	30

FROM

TO

NOTE: Read instructions before completing this form.

JUL 15 2014

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
Flow	SAMPLE MEASUREMENT	25.3476	29.7648	MGD							Total	
	PERMIT REQUIREMENT	N/A	N/A		N/A	N/A	N/A	N/A		Daily		
Suspended Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT	0	0	Kg/Day								
	PERMIT REQUIREMENT	704	921		N/A	N/A	N/A		1/Month	Comp.		
Settleable Solids Non-Cleaning Total Discharge	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	0.1	N/A			2/Month	Grab		
Suspended Solids Cleaning Effluent	SAMPLE MEASUREMENT				<1	1.65	2.3	MG/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	15*			2/Month	Grab		
Settleable Solids Cleaning Effluent	SAMPLE MEASUREMENT				<0.1	<0.1	<0.1	ML/L				
	PERMIT REQUIREMENT	N/A	N/A	N/A	N/A	0.2			1/Week	Grab		
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.							TELEPHONE		DATE		
Steve Croci Deputy Complex Manager, LNFH								509	548-7641	2014	4	30
TYPED OR PRINTED								AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Grab net over influent.



III 15 2014

SUSPENDED							SETTLEABLE					
DATE	April '14 Location	SAMPLE VOLUME	COMP SAMPLE	TSS	NET DIFF MG/L	RELEASE TSS	NET SAMPLE CONC ML/L	RELEASE SETT.	WASTE KG/D	TOTAL FLOW MG/D	PONDS IN USE	GPM
4/1/2014	WEEK 1										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml	<1				<0.1		0	29.7648	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000 ml									8 X 80'S	9750
	UNDER BRIDGE DISCHARGE	1000ml	<1								NURSERY	0
	PA POND DISCHARGE	1000ml					<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	20670
4/10/2014	WEEK 2										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		2.3			<0.1			29.7648	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	9750
	UNDER BRIDGE DISCHARGE	1000ml					<0.1				NURSERY	0
	PA POND DISCHARGE	1000 ml		<1			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	20670
4/17/2014	WEEK 3										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml		11			<0.1			29.7648	10 X 100'S	10920
	OUTSIDE SC CANAL DISCHARGE										8 X 80'S	9750
	UNDER BRIDGE DISCHARGE										NURSERY	0
	PA POND DISCHARGE	1000 ml		2.3			<0.1				Trout Pond / FL'S	0
											TOTAL GPM <sup>1</sup>	20670
4/24/2014	WEEK 4										ADULT POND	Reuse
	INTAKE ICICLE	1000 ml					<0.1			12.096	10 X 100'S	0
	OUTSIDE SC CANAL DISCHARGE	1000ml									8 X 80'S	8400
	UNDER BRIDGE DISCHARGE	1000 ml					<0.1				NURSERY	0
	PA POND DISCHARGE	1000 ml					<0.1				Trout Pond / FL'S	0
	WEEK 5											
	INTAKE ICICLE	1000 ml										
	PA POND DISCHARGE	1000 ml									TOTAL GPM <sup>1</sup>	8400
	RELEASE/DRAWDOWN											
4/23/2014	ADULT POND	1000 ml		19			10					
4/23/2014	8x80 RACEWAYS	1000ml		43.5			3					
4/22/2014	10x100 RACEWAYS	1000ml		10.5			0.1					
4/23/2014	COHO FL's	1000 ml		11.5			0.1					

When values are preceeded by the "less than" symbol, I used the reported value in the calculation then added the (<) to the left of the calculated value

<sup>1</sup>This amount includes well water

